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Fee(s) Transmittal. This certificate cannot be used for any other accompanying Nutter McClennen & Fish LLP papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Seaport West Certificate of Electronic Transmission 155 Seaport Boulevard I hereby certify that this Fee(s) Transmittal is being transmitted via the Office Boston, MA 02210-2604 Electronic filing system on the date indicated below. (Depositor's na (Sign ATTORNEY DOCKET NO. CONFIRMATION NO. FILING DATE FIRST NAMED INVENTOR APPLICATION NO. 101896-719 5023 10/750 173 12/31/2003 Edward B. Zalenski TITLE OF INVENTION: INSERTER INSTRUMENT AND IMPLANT CLIP SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE APPLN, TYPE 08/16/2011 \$300 \$1810 Non-Provisional NO \$1510 CLASS-SUBCLASS EXAMINER ART UNIT 606-099000 Arai, Michael J. 1. Change of correspondence address or indication of "Fee 2. For printing on the patent front page, list (1) the names of up to 3 registered patent Address" (37 CFR 1.363). Nutter McClennen & Fish LLP attorneys or agents OR, alternatively, Change of correspondence address (or Change of (2) the name of a single firm (having as a member Correspondence Address form PTO/SB/122) attached. a registered attorney or agent) and the names of "Fee Address" indication (or "Fee Address" Indication up to 2 registered patent attorneys or agents. If no form PTO/SB/47; Rev 03-02 or more recent) attached. name is listed, no name will be printed. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE Raynham, Massachusetts DePuy Spine, Inc. Individual X Corporation or other private group entity Please check the appropriate assignee category or categories (will not be printed on the patent): 4a. The following fee(s) are enclosed: 4b. Payment of Fcc(s): A check in the amount of the fee(s) is enclosed. X Issue Fee Payment by credit card. Authorization via EFS Web. Publication Fee (No small entity discount permitted) The Director is hereby authorized to charge any add'tl, fee(s), or credit any overpayment, to Advance Order -# of Copies Deposit Account Number 141449 5. Change in Entity Status (from status indicated above) b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE. The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Un

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Ronald F. Cabill